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DATE: July 19, 2005

TO: Amendment
Commissioner for Patents

ATTN: Examiner: Edan Orgad
Art Unit: 2684

FAX NUMBER: (703) 872-9306

FROM: Jae-Hee Choi, Attorney for Applicant
Registration No. 45,288

Total Number of Pages Sent: 13 (including this transmittal cover sheet)

FILING BY FACSIMILE:

ATTORNEY DOCKET NO.: 010129U1

ENCLOSED ARE:

- Amendment (11 pages)
- Transmittal (1 page)

APPLICANT: Schiff, Leonard N.

ASSIGNEE: QUALCOMM Incorporated

SERIAL NO.: 10/602,355

FILED: June 23, 2003

FOR: SATELLITE-BASED PROGRAMMABLE ALLOCATION OF BANDWIDTH FOR FORWARD AND RETURN LINES

Please contact Kate Lane at (858) 658-2047 if all pages do not transmit.

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PATENT

AMENDMENT TRANSMITTAL FORM

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450Customer No.: 23696
Attorney Docket No.: 010129U1
In Re Application of: Leonard Norman Schiff
Serial Number: 10/602,355
Filed: June 23, 2003
Examiner: Eden Orgad
Group Art Unit: 2684

Dear Sir:

Transmitted herewith for filing is a Response to Office Action in the above identified application.

CLAIMS	(a) Number Remaining After Amendment	(b) Highest Number Previously Paid For	(c) Extra Claims	Large Entry Fee	Fee Paid
Total*	32	32	0	x \$50 =	\$0
Independent**	6	6	0	x \$200 =	\$0
Multiple Dependent Claim(s): <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				\$360	\$0
EXTENSION FEES <input type="checkbox"/> One Month <input type="checkbox"/> Two Months <input type="checkbox"/> Three Months				\$120	\$0
				\$450	\$0
				\$1020	\$0
TERMINAL DISCLAIMER				\$130	\$0
				TOTAL FEE	\$0

*If the number in column a is less than 20, enter 0 in column c.

**If the number in column a is less than 3, enter 0 in column c.

4. ☐ Fee check in the amount of \$_____ is enclosed to pay for any claim and/or extension fees.
5. ☐ Please charge Deposit Account No. 17-0026 of QUALCOMM Incorporated the amount of \$_____.
- The Commissioner is hereby authorized to charge payment of any additional fees that may be required, or credit any overpayment to said Deposit Account No. 17-0026. A duplicate of this sheet is enclosed for fee processing.
6. ☒ The Commissioner is further hereby authorized to charge to said Deposit Account No. 17-0026, pursuant to 37 CFR 1.25(b), any fee whatsoever which may become properly due or payable, as set forth in 37 CFR 1.16 to 37 CFR 1.18 inclusive, for the entire pendency of this application without specific additional authorization.

Date: July 19, 2005

Signature: Jae-Hye Choi, Reg. No. 45,288
(858) 651-5469QUALCOMM Incorporated
Attn: Patent Department
5775 Morehouse Drive
San Diego, California 92121-1714
Telephone: (858) 658-5787
Facsimile: (858) 658-2502

CERTIFICATE OF MAILING/TRANSMISSION (37 CFR 1.8(a))

I hereby certify that this correspondence is, on the date shown below, being:

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Depositor's Name: _____
(type or print name)

Date: July 19, 2005

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Depositor's Name: Kate Lane
(type or print name)Signature: 

(TRANSAMD.VER1.13-04/30/04)

Attorney Docket No. 010129U1

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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In Re Application of)

Schiff, Leonard N.)

Serial No. 10/602,355)

Filed: June 23, 2003)

For: SATELLITE-BASED
PROGRAMMABLE
ALLOCATION OF BANDWITH
FOR FORWARD AND RETURN
LINES

) Group No. 2684

JUL 19 2005

AMENDMENTCommissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

In response to the Office Action dated April 19, 2005, please amend the above-identified application as follows:

CERTIFICATE OF MAILING/TRANSMISSION (37 CFR 1.8(a))

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MAILING☐ deposited with the United States Postal Service with sufficient postage as first class mail, in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Depositor's Name:

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Date: July 19, 2005**FACSIMILE**☒ transmitted by facsimile to the Patent and Trademark Office.

Depositor's Name: Kate Lane

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Signature: Kate Lane